

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* STATE BOARD OF MEDICAL EXAMINERS
C/O H. JOSEPH FALGOUT MD and MARK H. LEQUIRE, MD
CO-EXECUTIVE DIRECTORS
P.O. BOX 946
MONTGOMERY AL 36101-0946

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT

Debra P. Hackett
Signature of Clerk or Deputy Clerk

SCANNED

DN 8/15

4

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature_____
Printed name and title_____
Server's address
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only
For delivery information, visit our website at www.usps.com®.**OFFICIAL USE**

Certified Mail Fee 3.35

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ 2.75☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage 2.90

Total Postage and Fees 9.00

Sent To BOARD OF MEDICAL EXAMINERS

C/O H. JOSEPH FALGOUT, MD and

MARK H. LEQUIRE, MD, EXEC. DIR

City, State, ZIP+4® PO BOX 946

MONTGOMERY AL 36101-0946

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7016 1970 0000 9008 7780

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama

Norris W. Green

Plaintiff

v.

State Board of Medical Examiners, et al

Defendant

Civil Action No. 2:18-cv-00719-TFM

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* The Attorney General of the State of Alabama
501 Washington Avenue
Montgomery, AL 36130

A lawsuit has been filed against you.

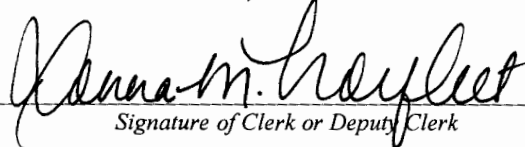
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B Kinsey Green, Jr.
Attorney for Plaintiff
Reeves & Steward PC
P O Box447
Selma, Alabama 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

Server's signature_____
Printed name and title_____
Server's address
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only
For delivery information, visit our website at www.usps.com®.**OFFICIAL USE**

Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

2:18cv719Postmark
Here

|||||
 The Attorney General of the State of Alabama
 501 Washington Avenue
 Montgomery, AL 36130

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☒

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

The MEDICAL ASSOCIATION OF ALABAMA
C/O MARK JACKSON, EXECUTIVE DIRECTOR
19 SOUTH JACKSON STREET
MONTGOMERY, AL 36104-3812

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT

Date:

August 15, 2018

Debra P. Hackett
Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

2016 1970 0000 9008 7773

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To <u>MEDICAL ASSOCIATION OF ALA.</u>	
Street and Apt. No., or PO Box No. <u>C/O MARK JACKSON, EXEC. DIR.</u>	
City, State, ZIP+4® <u>19 SOUTH JACKSON STREET</u>	
PS Form 3800, April 2016 PSN 7530-02-000-9047 See Reverse for Instructions	

2:18cv719

Postmark Here

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama

Norris W. Green

Plaintiff

v.

State Board of Medical Examiners, et al

Defendant

)
)
)
)
)

Civil Action No. 2:18-cv-00719-TFM

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Boyde Jerome Harrison, MD
525 Layne Hill
Haleyville, AL 35565-7048

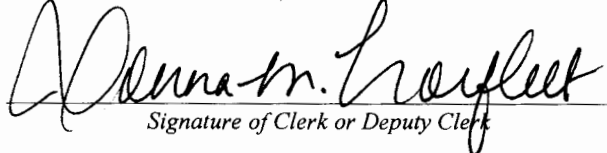
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B Kincey Green, Jr.
Attorney for Plaintiff
Reeves & Steward PC
P O Box447
Selma, Alabama 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Date: August 15, 2018

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____
 was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

 Server's signature

 Printed name and title

 Server's address

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
Total Postage and Fees	9.00
Sent To	
Boyde Jerome Harrison, MD	
Street and Apt	
525 Layne Hill	
City, State, Zip	
Haleyville, AL 35565-7048	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark
Here

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama

Norris W. Green

Plaintiff

v.

State Board of Medical Examiners, et al

Defendant

)

)

)

)

)

Civil Action No. 2:18-cv-00719-TFM

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* H. Joseph Falgout, MD
3601 Grand Arbor Drive
Tuscaloosa, Alabama 35406-2928

A lawsuit has been filed against you.

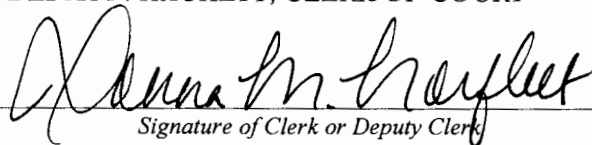
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B Kincey Green, Jr.
Attorney for Plaintiff
Reeves & Steward PC
P O Box447
Selma, Alabama 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT

Date: August 15, 2018


Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature_____
Printed name and title_____
Server's address
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only
For delivery information, visit our website at www.usps.com®.**OFFICIAL USE**

Certified Mail Fee	3.35
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.15
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
Total Postage and Fees	9.00

Postmark
Here

Sent: H. Joseph Falgout, MD
 Street: 3601 Grand Arbor Drive
 City: Tuscaloosa, Alabama 35406-2928

A.

7016 1970 0000 9008 8565

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

Norris W. Green

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Mark H. Lequire, MD
2055 Myrtlewood Drive
Montgomery AL 36111-1003

A lawsuit has been filed against you.

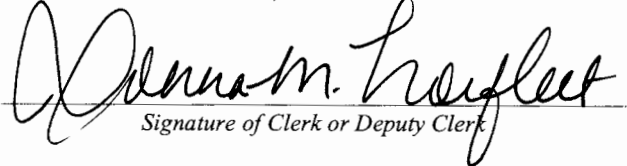
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B Kinsey Green Jr.
Attorney for Plaintiff
Reeves & Stewart PC
PO Box 447
Selma, Alabama 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Civil Action No. **2118-cv-719****PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

Ad

7016 1970 0000 9008 8589

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To	
MARK H. LEQUIRE, MD	
Street and Apt. No., or P.O. Box No.	
2055 MYRTLEWOOD DRIVE	
City, State, ZIP+4®	
MONTGOMERY, AL 36111-1003	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Server's signature

Printed name and title

Server's address

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

Norris W. Green

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Gregory W. Ayers, MD
2405 ALTARIDGE CIRCLE
VESTAVIA, ALABAMA 35243-4527

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

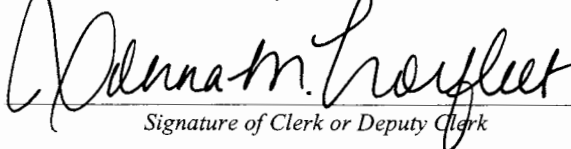
B Kinsey Green Jr.
Attorney for Plaintiff
Reeves & Stewart PC
PO Box 447
Selma, Alabama 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-00719

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____
 was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

 Server's signature

 Printed name and title

 Server's address

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To	
GREGORY W. AYERS, MD.	
Street and Apt. No., or PO Box No.	
2405 ALTARIDGE CIRCLE	
City, State, ZIP+4®	
VESTAVIA, AL 35243-4527	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

2:18cv719


Postmark
Here

7017 3380 0000 5793 6218

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama 

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

ELI L. BROWN, MD
5539 LAKE TRACE DRIVE
HOOVER, ALABAMA 35244-3966

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Date: August 15, 2018

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee 3.35

\$ _____
 Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ _____
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____

Postage 2.90

\$ _____
 Total Postage and Fees 9.00

Sent To

ELI L. BROWN, MD.
 Street and Apt. No., or P.O. Box No. 5539 LAKE TRACE DRIVE
 City, State, ZIP+4® HOOVER, AL 35244-3966

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7016 1970 0000 9000 8572

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☒

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

DAVID P. HERRICK, MD
2169 ALLENDALE ROAD
MONTGOMERY, ALABAMA 36111-1017

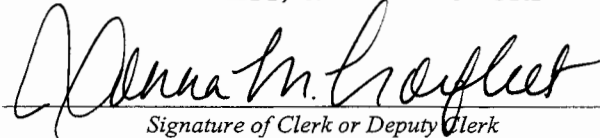
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Date:

August 15, 2018

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____

was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____

on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) __________, a person of suitable age and discretion who resides there,
on (date) _____, and mailed a copy to the individual's last known address; or☐ I served the summons on (name of individual) _____, who is
designated by law to accept service of process on behalf of (name of organization) _____

on (date) _____; or

☐ I returned the summons unexecuted because _____; or☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature_____
Printed name and title_____
Server's address

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To	
DAVID P. HERRICK, MD	
Street and Apt. No., or PO Box No.	
2169 ALLENDALE ROAD	
City, State, ZIP+4®	
MONTGOMERY, AL 36111-1017	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark
Here

5229 6225 0000 0900 2102

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

BEVERLY F. JORDAN, MD
7 INDIGO PLACE
ENTERPRISE, ALABAMA 36330-8110

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

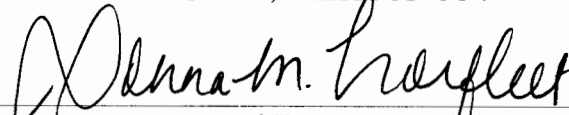
B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____
 was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

 Server's signature

 Printed name and title

 Server's address

Ad 9526 3360 0000 5793 6256

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To	
BEVERLY F. JORDAN, MD	
Street and Apt. No., or PO Box No.	
7 INDIGO PLACE	
City, State, ZIP+4®	
ENTERPRISE, AL 36330-8110	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark Here

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☒

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

GARY F. LEUNG, MD
567 HAMILTON HILLS COURT
AUBURN, ALABAMA 36830-7539

A lawsuit has been filed against you.

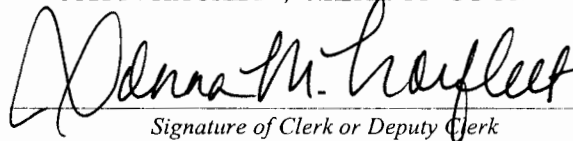
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee <div style="text-align: right; font-size: 1.2em;">3.35</div>	Postmark Here
\$	
Extra Services & Fees <i>(check box, add fee as appropriate)</i>	
<input type="checkbox"/> Return Receipt (hardcopy) \$ <div style="text-align: right; font-size: 1.2em;">2.75</div>	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage	
\$ <div style="text-align: right; font-size: 1.2em;">2.90</div>	
Total Postage and Fees	
<div style="text-align: right; font-size: 1.2em;">9.00</div>	
\$	
Sent To	
_____ Street and Apt. No., or PO Box No.	
_____ City, State, ZIP+4®	
<div style="text-align: center;"> GARY F. LEUNG, MD 567 HAMILTON HILLS COURT AUBURN, AL 36830-7539 </div>	

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☒

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

)

)

)

)

)

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

vs.

To: *(Defendant's name and address)*

JOHN S. MEIGS, MD
208 PIERSON AVENUE
CENTERVILLE, ALABAMA 35042-2918

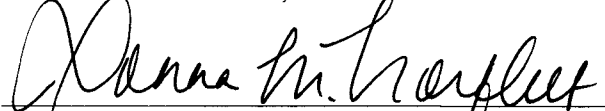
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Date: August 15, 2018

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
Total Postage and Fees	9.00
Sent To	
JOHN S. MEIGS, MD	
Street and Apt. No., or P.O. Box No.	
208 PIERSON AVENUE	
City, State, ZIP+4®	
CENTERVILLE, AL 35042-2918	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark
Here

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

)
)
)
)
)

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

DICK OWENS, MD
904 26TH STREET
HALEYVILLE, ALABAMA 35565-1719

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

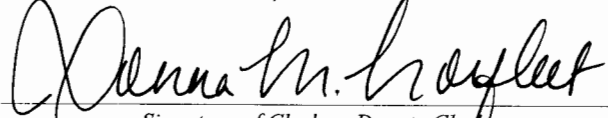
B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____
 was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

 For delivery information, visit our website at www.usps.com®.
OFFICIAL USE

Certified Mail Fee 3.35

\$

Extra Services & Fees (check box, add fees as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage 2.90

\$

Total Postage and Fees 9.00

\$

Sent To

DICK OWENS, MD

Street and Apt. No., or PO Box No.

904 26TH STREET

City, State, ZIP+4®

HALEYVILLE, AL 35565-1719

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Server's signature

Printed name and title

Server's address


Ac

7016 1970 0000 9008 7735

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama 

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

BRADLEY S. RICE, MD
3110 GREYSTONE DRIVE SE
OWENS CROSS ROAD, ALABAMA 35763-8413

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

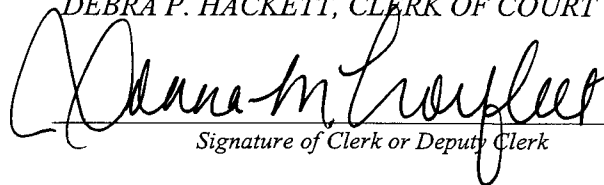
B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT



Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for (name of individual and title, if any) _____
 was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

 Server's signature

 Printed name and title

 Server's address

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee 3.35

\$ 2.75

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage 2.90

\$ Total Postage and Fees 9.00

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 1-324 / 536-02 J00-9047

2:18cv719

Postmark
Here

BRADLEY S. RICE, MD
 3110 GREYSTONE DRIVE SE
 OWENS CROSS ROAD, AL

See Reverse for Instructions

7016 1970 0000 9008 8534

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

CHARLES M. A. ROGERS, IV, MD
54 BYRNES BLVD
MOBILE, ALABAMA 36608-2620

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

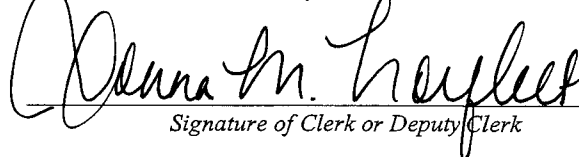
B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature_____
Printed name and title_____
Server's address
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only
For delivery information, visit our website at www.usps.com®.**OFFICIAL USE**

Certified Mail Fee	3.35
Postage	2.90
Total Postage and Fees	9.00

Postmark
Here

Sent To
 Street and Apt. No., or P.O. Box No.
 City, State, ZIP+4®

CHARLES M. A. ROGERS, IV, MD
 54 BYRNES BLVD
 MOBILE, AL 36608-2620

7016 1970 0000 9008 8503

A

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☒

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

)
)
)
)
)

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

PATRICIA SHANER
8505 OLDE GATE
MONTGOMERY, ALABAMA 36116-6655

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

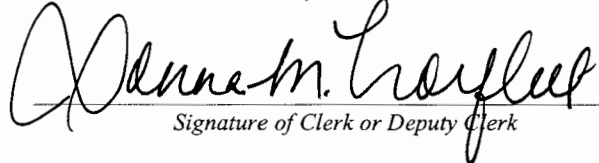
B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

August 15, 2018

DEBRA P. HACKETT, CLERK OF COURT



Signature of Clerk or Deputy Clerk

MD AL MODIFIED AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 2:18-cv-719**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

Ac

7016 1970 0000 9008 8510

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	3.35
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.15
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	2.90
\$	
Total Postage and Fees	9.00
\$	
Sent To	
PATRICIA SHANER	
Street and Apt. No., or PO Box No.	
8505 OLDE GATE ROAD	
City, State, ZIP+4®	
MONTGOMERY, AL 36116-6655	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Server's signature

Printed name and title

Server's address

MD AL MODIFIED AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Middle District of Alabama ☐

NORRIS W. GREEN

Plaintiff

v.

STATE BOARD OF MEDICAL EXAMINERS, ET AL

Defendant

)
)
)
)
)

Civil Action No. 2:18-cv-719

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

ERIC WILSON HUNTER
133 SPRING STREET
MOUNTAIN BROOK, ALABAMA 35213-2932

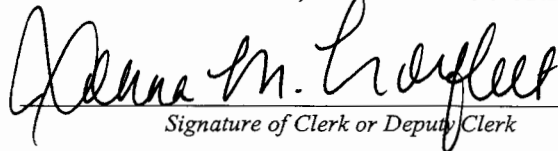
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ.P. 12 (a)(2) or (3) — or 90 days in a Social Security action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

B. KINCEY GREEN JR.
REEVES & STEWART PC
PO BOX 447
SELMA, AL 36702-0447

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DEBRA P. HACKETT, CLERK OF COURT


Signature of Clerk or Deputy Clerk

Date:

August 15, 2018

Civil Action No. **2:18-CV-719****PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

 For delivery information, visit our website at www.usps.com®.
OFFICIAL USE

Certified Mail Fee	3.35
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage	2.90
Total Postage and Fees	9.00

Sent To	
ERIC WILSON HUNTER	
Street and Apt. No., or P.O. Box No. 133 SPRING STREET	
City, State, ZIP+4® MOUNTAIN BROOK, AL 35213-2932	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Server's signature_____
Printed name and title_____
Server's address

Adc

7016 1970 0000 9008 8527